CLAIMS ONLY

Application Number: 10/618,962

Filing Date:

Applicant(s):

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2		1					52					
3		1					53					
4		1					54					
5		1					55					
6		1					56					
7		1					57					
8		1					58					
9	1						59					
10		1					60					
11		1					61					
12	1						62					
13		1					63					
14		1					64					
15		1					65					
16	1						66					
17		1					67					
18		1					68					
19		1					69					
20		1					70					
21		1					71					
22	1						72					
23		1					73					
24		1					74					
25		1					75					
26	1						76					
27		1					77					
28	1						78					
29		1					79					
30		1					80					
31	1						81					
32		1					82					
33		1					83					
34		1					84					
35		1					85					
36		1					86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	5	45					Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					